OMB APPROVAL OMB Number: 3235-0076 **UNITED STATES** FORM D April 30, 2008 Expires: SECURITIES AND EXCHANGE COMMISSION Estimated average burden hours per response 16.00 Washington, D.C. 20549 FORM D SEC USE ONLY NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, Prefix Serial SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION check if this is an amendment and name has changed, and indicate change.) Name of Offering Private Placement -Limited Liability Company Common Units1 Filing Under (check box(es) that apply): ☐ Rule 505 ■ Rule 506 □ Section 4(6) **⊠** ULOE ☐ Rule 504 ☒ New Filing Type of Filing: □ Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) TWO DEGREES, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Numbe 821 Second Avenue, Suite 1900, Seattle, WA 98104 (206) 441-5600 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Same as Executive Offices **Brief Description of Business** Provides consulting, professional services and staffing services, and specializes in the fields of information technology, finance and accounting. Type of Business Organization ☐ corporation ☐ limited partnership, already formed ☑ other (please specify): limited liability company ☐ business trust ☐ limited partnership, to be formed

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

| 1 | 0 | | 9 | 3 | ⊠ Actual □ Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Year

CN for Canada; FN for foreign jurisdiction) Clo MOSICION

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

Month

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

¹ A Unit consists of one Common Unit and 0.10 Incentive Common Unit. SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Jackson, Brad G.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
821 Second Avenue, Suite 1900, Seattle, WA 98104										
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Rojas, Anthony M.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
821 Second Avenue, Suite 1900, Seattle, WA 98104										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Weeks, Bryan J.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
821 Second Avenue, Suite 1900, Seattle, WA 98104										
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Holm, Nora Horan										
Business or Residence Address (Number and Street, City, State, Zip Code)										
4824 S. Blue Spruce, Evergreen, CO 80439										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner										
Full name (Last name first, if individual)										
Dunings on Benidence Address (Number and Chart City Class 7 in Code)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)										
(Ose office, of copy and use additional copies of this sheet, as necessary.)										

				B. II	NFORMAT	TION ABO	UT OFFEI	RING				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No		
1. Has th	ne issuer sol	d, or does t								·····	🗵	
					dix, Colum							
2. What	is the minir	num investi	ment that w	ill be accep	ted from any	y individual				• • • • • • • • • • • • • • • • • • • •	<u>\$N/A</u>	
											Van	Ma
3. Does	the offering	nermit ioir	nt ownershir	n of a single	unit?						Yes □	No ⊠
										directly, an		_
										e offering. I		
										vith a state o		
								ed are asso	ciated perso	ons of such	a	
	(Last name			Поппаноп	for that brok	ter or deare.	only.					
ruii ilaiile	(Last name	insi, ii iic	iividuai)									
Ducinece (or Decidenc	A Addrace (Number on	1 Street Cit	y, State, Zij	o Code)						
Dusiliess (oi Residenc	e Address (Number and	ı Sileet, Cil	y, State, Zij	o Code)						
Name of	Associated I	Broker or D	lealer					 				
ranic of 2	1330CIACCI	DIORCI OI D	carci									
States in V	Which Perso	on Listed H	as Solicited	or Intends	to Solicit Pu	ırchasers						
			individual									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
						~ "						
[MT]	[NE]	[NV]	[NH]	[rv]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if inc	lividual)						-			
Business of	or Residenc	e Address (Number and	d Street, Cit	y, State, Zip	o Code)						
) C.		2 1 5										
Name of A	Associated I	Broker or D	еалет									
Ctatan in 1	1/hich Doss	m I istad U	oo Calisiad	on Intended	to Solicit Pu							
												All States
[AL]	[AK]	[AZ]	[AR]	CA]		. [CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if inc	lividual)									
Business of	or Residenc	e Address (Number and	l Street, Cit	y, State, Zip	Code)						
Name of A	Associated I	Broker or D	ealer									
States in V	Which Perso	n Listed U	as Solicited	or Intende	to Solicit Pu	irchasers						
			individual			a chastis					П	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
							-					
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Aggregate	Am	ount Already	
2.	Type of Security .		ffering Price	Sold		
	Debt	\$	0.00	\$	0.00	
	Equity	\$	0.00	\$	0.00	
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	<u>\$</u>	0.00	\$	0.00	
	Partnership Interests	\$	0.00	\$		
	Other - LLC Common Membership Interests	\$	999,982.50	\$	835,000.00	
	Total	\$	999,982.50	\$	835,000.00	
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors	Do of	Aggregate Illar Amount Purchasers	
	Accredited Investors	_		\$		
	Non-accredited Investors		7	\$	835,000.00	
	Total (for filings under Rule 504 only)	_		\$		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Turns of	De	ollar Amount	
	Type of offering		Type of Security	Du	Sold	
	Rule 505		•	\$		
	Regulation A			\$		
	Rule 504	_		\$		
	Total			\$	0	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		
	Printing and Engraving Costs			\$		
	Legal Fees		×	\$	10,000.00	
	Accounting Fees		\boxtimes	\$	5,000.00	
	Engineering Fees			\$		
	Sales Commissions (specify finders' fees separately)			\$		
	Other Expenses (identify) state notice fees		X	\$	700.00	
	Total		×	\$	15,700.00	

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE	OF PROCEEDS		
	b. Enter the difference between the aggregate offering price given in response to Part C Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference the "adjusted gross proceeds to the issuer."	is		\$	984,282.50
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be use for each of the purposes shown. If the amount for any purpose is not known, furnish an estime and check the box to the left of the estimate. The total of the payments listed must equal adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	ate			
			Payments to		
			Officers,		D
			Directors, & Affiliates		Payments to Others
	Salaries and fees		\$		\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$
	Construction or leasing of plant buildings and facilities		\$		\$.
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)				
			\$		\$
	Repayment of indebtedness		\$		\$
	Working capital		\$	\boxtimes	\$ 984,282.50
Ot	her (specify):				\$
	Column totals		\$	X	\$ 984,282.50
To	tal Payments Listed (column totals added)		≥ \$	984,2	82.50
+ .	「「A Definition of the Company of t	. (** * 1	The production of the second s	<u> </u>	North Control of the State of t
si	te issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	nmis	sion, upon written i	ule 50 reques	95, the following st of its staff, the
					
	suer (Print or Type) WO DEGREES, LLC	Date	August	29.:	2007
N:	ame of Signer (Print or Type) Title of Signer (Print or Type)		, ,		
A	nthony M. Rojas President				
				•	
					•

ATTENTION

- Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	c .	7 7
		Yes	No
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?		×
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice CFR 239.500) at such times as required by state law.	ce on F	om D (17
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished beofferees.	y the is	ssuer to
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uni Offering Exemption (ULOE) of the state in which this notice is filed and understand that the issuer claiming the availability of the burden of establishing that these conditions have been satisfied.		
	te issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by authorized person.	y the ur	ndersigned
	wo DEGREES, LLC Signature August 21,	2007	
	ime of Signer (Print or Type) Title of Signer (Print or Type) Thony M. Rojas Tresiden		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	Intended to sell to non-accredited investors in State (Part B-Item 1)		3		5				
			Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Common Units ¹	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR]								
CA	Х		\$999,982.50	0	\$0.00	1	\$100,000.00		х
СО									
CT									
DE									
DC									
FL			!						
GA	x		\$999,982.50	0	\$0.00	2	\$210,000.00		Х
HI									
ID									
IL	Х		\$999,982.50	0	\$0.00	2	\$300,000.00		X
IN	х		\$999,982.50	0	\$0.00	1	\$200,000.00		Х
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI							,		
MN									
MS									
МО							ļ <u>.</u>		
MT									

¹ A Unit consists of one Common Unit and 0.10 Incentive Common Unit.

APPENDIX

1	2		2 3 4						5
	Intended to sell and aggregat to non-accredited investors in State (Part B-Item 1) Type of secur and aggregat offering price offering price offered in state (Part C-Item 1)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Common Units ¹	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NE		İ						ļ	
NV									
NH									
NJ							· · · · · · · · · · · · · · · · · · ·		
NM									
NY									
NC									
ND									
ОН		ļ Ļ		·			·		
OK									
OR									
PA									
RI									
SC									:
SD									
TN									
TX									
UT									
VT				,					
VA									
WA	Х		\$999,982.50	0	\$0.00	1	\$25,000.00		X
WV									
WI									
WY									
PR									

K:\53484\99999\XND\XND_O202G Form D 8-17-06



¹ A Unit consists of one Common Unit and 0.10 Incentive Common Unit.